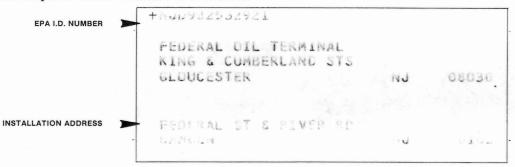


ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act(RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.



EPA Form 8700-12B (4-80)

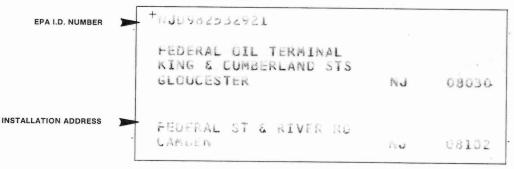
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EPA Form 8700-12B (4-80)

13/69/61

United States Environmental Prof. Washington, DC 204 ■ Page 19	60		Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).				
For Official Use Only							
C							
Jacob Hosing's EPA ID Alumbar	Annewad	Date Receiv	ved day) 067				
Installation's EPA ID Number	Approved	0002	1700				
F $ N + D$		0003	///Cymaur				
FEDRRAL OIL TER	MIN	02					
II. Installation Mailing Address		A SAME	Server Chief to Server and				
	P.O. Box						
3KING & CUMBERL	AND	573					
City or Town			State ZIP Code				
GLOUCESTER, NJ			N J08030				
III. Location of Installation	and the second	e in the second distriction	and the state of t				
Street or Ro	oute Number						
5 F E D E R Q L S T & R	1 VE	RRD					
City or Town	<u> </u>		State ZIP Code				
C AMDEN			N208105				
IV. Installation Contact			the testing in placed it well-area.				
Name and Title (last, first, and job title)		Pho	ne Number (area code and number)				
BROWN, JOHN MST	I	60	94561370				
		The transfer of the second	inglinded a court of the second of the secon				
A. Name of Installation's Legal Owner			B. Type of Ownership (enter code)				
R F EDERAL OIL CO	• 1 1						
VI. Type of Regulated Waste Activity (Mark 'X' in the app A. Hazardous Waste Activity	propriate bo		ctructions.) Nil Fuel Activities				
☐ 1b. Less than 1,000 kg/mo.	6. Off-Specification Used Oil Fuel						
2. Transporter	(enter	'X' and mark appro	priate boxes below)				
3. Treater/Storer/Disposer		a. Generator Market	ing to Burner				
4. Underground Injection	b. Other Marketer						
5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)	c. Burner						
a. Generator Marketing to Burner	7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification						
☐ b. Other Marketer c. Burner	lainthik bro	who First Claims the Oil Meets the Specification					
VII. Waste Fuel Burning: Type of Combustion Device (entit	er 'X' in all appi	ropriate boxes to ind	icate type of combustion device(s) in				
which hazardous waste fuel or off-specification used oil fuel is burned. S A. Utility Boiler B. Industria			ndustrial Furnace				
VIII. Mode of Transportation (transporters only — enter '.							
	her (specify)						
IX. First or Subsequent Notification	Maria (1974)	mark Mills bin er h					
Mark 'X' in the appropriate box to indicate whether this is your install notification. If this is not your first notification, enter your installation's E	ation's first no	otification of hazard	ous waste activity or a subsequent				
mounication. It this is not your hist nothication, enter your installation's E			stallation's EPA ID Number				
A. First Notification B. Subsequent Notification (complete ite.	m C)	0.11					

				— For Official Use Onl	у
		1	C W		T/A C
X. Description o	f Hazardous Wastes (co	ntinued from front	A STATE OF THE PARTY.	with the form of the property	
A. Hazardous Waste	s from Nonspecific Sources. sources your installation hand	Enter the four district		261.31 for each listed ha	zardous waste
50 1	2	3	4	5	6
9189	9188	XOOI			
7	8	9	10	11	12
B. Hazardous Waste: specific sources v	s from Specific Sources. Ente our installation handles. Use a	er the four-digit number	from 40 <i>CFR</i> Part 261.	32 for each listed hazard	lous waste from
13	14	15	16	. 17	18
19	20	21	22	23	24
25	26	27	28	29	30
your installation ha	nical Product Hazardous Was andles which may be a hazard	tes. Enter the four-digit ous waste. Use addition	number from 40 CFR P all sheets if necessary.	art 261.33 for each cher	mical substance
31	32	33	34	35	36
37	38	39	40	41	42
					42
43	44	45	46	47	48
). Listed Infectious V	Vastes. Enter the four-digit nund research laboratories your i	mber from 40 CFR Part	261.34 for each hazard	ous waste from hospital	s, veterinary hos-
49	50	51	52	scessary.	
				53	54
. Characteristics of N your installation har	Nonlisted Hazardous Wastes. ndles. (See 40 CFR Parts 261.2	Mark 'X' in the boxes c	orresponding to the cha	racteristics of nonlisted	hazardous wastes
. ,	able (COMBUSTIBLE) 2	177	3. Reactive	• *	4. Toxic
I. Certification	Miles to Alexander	(Book)	(D003)		(D000)
obtaining the in	penalty of law that I have sched documents, and the formation, I believe that icant penalties for submi	nat based on my inc the submitted infor	quiry of those indiv	viduals immediately	responsible for
ignature	Bank	Name and Officia	al Title (type or print)	Date S	Signed
Joine.	is consider	JOHN I	BROWN N	1ST1 3/	14/88

EPA Form 8700-12 (Rev. 11-85) Reverse



RCRIS NOTIFICATION DATA DISCREPANCY FORM

	ation from RCRIS	A		Now In	formest		
Facility Name: Fee	deral Oil Terminal		-	TOOM III	ormation	(make change to "E" n	oord only
Facility EPA ID Num	per: NJD982532	921	Facility	Name: teden	al-Wood	bury Oil Com	any
Facility Address: 14	35 Pove P- 1	121.	Facility	Name: <u>Federal</u> EPA ID Numb	er: NJD 13100	16117 CORTER)
7 1000	os kiver koad		Facility	Address: 14	35 Rivor	Pro-1	
Ciana (I	. d					ROCIA	
Mailler Add	mden St: N	<u>J_ Zip:</u>	1	City: Co	molan	04 4/ 77 74	
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domey contact:	Dhone			City:		_ St: Zip	
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Other: Out of busice In response	to this request, pleator Information:	ase modify RCR	Generate Other: IS Handle	or Status (LQG	Data for t	he following:	ne store
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In response General General Facility Name Facility Address Facility Contact SIC Code(s)	to this request, pleator Information: EPA ID Number Mailing Address	ase modify RCR	Generate Other: S Handle Ade 1 conditional Generator Definitional 3 Delicat Wa	er Notification J/Change General Comments Small Quantity Fincluded Wastes	Data for the crator State	He following: US Codes; He langer Generates HW SUII in Business No langer Generates HW Out of Business #delectors Never Generated Hazarda	l Oil Ter
In response General General Facility Name Facility Address Facility Contact	to this request, pleator Information: EPA ID Number Mailing Address Phone	ase modify RCR	Generate Other: S Handle Add 1 conditional Generator Definitional 3 Delicited Wa 4 One-time Ha	er Notification	Data for terator State	he following: US Codes: No longer Generates HW Still in Business No longer Generates HW Out of Business #delic	Oil Ter

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